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CONFIRMATION NO. 6826

Bib Data Sheet

SERIAL NUMBER 10/696,675	FILING OR 371(c) DATE 10/28/2003 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 7034/107
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**APPLICANTS**

Robert R. Mantell, Arlington Heights, IL;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/421,662 10/28/2002 *AB*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

*None AB*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 01/29/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 8	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				

Verified and  
Acknowledged

Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**

00757

**TITLE**

Dual-capacity insufflator tube

FILING FEE RECEIVED 1360	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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